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License Number

### Crematory License 2009 1<sup>st</sup> Quarter Report

200	9 '	1 <sup>st</sup> Quarter Report		Receipt Number	
				Date Processed	
Due on	or l	before: April 30, 2009			
Cremate	ory	Name:			
Lice	nse	No.:			
		mber of cremations performed from .			
	A.	Number of cremations performed		_ x \$8.50 =	
		Total Due		\$	
Please ma isted abov		our check payable to the "Cemetery a	and Fune	ral Bureau" and send to the P.O.	Вох
Authoriz Signatu				Date:	
Name (pri	nt): _				
Tit	tle: _			Telephone:	







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## Crematory License 2009 2<sup>nd</sup> Quarter Report

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License Number	
Receipt Number	
Date Processed	

Due on or before: July 31, 2009

**Total Due** 

Cremat	tory	Name:			
Lice	nse	No.:			
List the to	et the total number of cremations performed from April 1, 2009 through June 30, 2009.				
	A.	Number of cremations performed	v ¢0 50		

Please make your check payable to the "Cemetery and Funeral Bureau" and send to the P.O. Box listed above.

Authorized Signature:	Date:
Name (print): _	
Title:	Telephone:



P. O. Box 989003, West Sacramento, CA 95798-9003 P (916)574-7870 F (916)928-7988 NV.

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Date:

# **Crematory License 2009** 3<sup>rd</sup> Quarter Report

•	For Bureau Use Only
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	Receipt Number
	Date Processed
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Due on or before: October 31, 2009

Cremat	tory	Name:		
Lice	nse	No.:		
List the to	e total number of cremations performed from July 1, 2009 through September 30, 2009.			
		T		1
	A.	Number of cremations performed	x \$8.50 =	
		Total Due	\$	
Please make your check payable to the "Cemetery and Funeral Bureau" and send to the P.O. Box listed above.				

Title: \_\_\_\_\_ Telephone: \_\_\_\_\_

Cemetery and Funeral Bureau www.cfb.ca.gov

Signature:

Name (print):

Authorized



P. O. Box 989003, West Sacramento, CA 95798-9003 P (916)574-7870 F (916)928-7988



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Telephone:

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## Crematory License 2009 4<sup>th</sup> Quarter Report

200	9 .	4 Quarter Neport	Receipt Number	
			Date Processed	
Due on	or l	before: January 31, 2010		
Cremate	ory	Name:		
Lice	nse	No.:		
List the tota	al nu	mber of cremations performed from (	October 1, 2009 through December 31,	, 2009.
	A.	Number of cremations performed	x \$8.50 =	
Ī		Total Due	\$	
Please ma isted abov		our check payable to the "Cemetery a	and Funeral Bureau" and send to the P.	.O. Box
Authoriz Signatu			Date:	
Name (pri	nt): _			